



QUARTERLY STATEMENT
AS OF March 31, 2013
OF THE CONDITION AND AFFAIRS OF THE
TOTAL HEALTH CARE, INC.

NAIC Group Code	1238 (Current Period)	1238 (Prior Period)	NAIC Company Code	95644	Employer's ID Number	38-2018957
Organized under the Laws of	Michigan		State of Domicile or Port of Entry	Michigan		
Country of Domicile	United States of America					
Licensed as business type:	Life, Accident & Health[] Dental Service Corporation[] Other[]		Property/Casualty[] Vision Service Corporation[] Is HMO Federally Qualified? Yes[X] No[] N/A[]		Hospital, Medical & Dental Service or Indemnity[] Health Maintenance Organization[X]	
Incorporated/Organized	07/01/1973		Commenced Business	05/01/1976		
Statutory Home Office	3011 W. GRAND BLVD. SUITE 1600 (Street and Number)		DETROIT, MI, US 48202 (City or Town, State, Country and Zip Code)			
Main Administrative Office	3011 W. GRAND BLVD. SUITE 1600 (Street and Number)		DETROIT, MI, US 48202 (City or Town, State, Country and Zip Code)			
Mail Address	3011 W. GRAND BLVD. SUITE 1600 (Street and Number or P.O. Box)		DETROIT, MI, US 48202 (City or Town, State, Country and Zip Code)			
Primary Location of Books and Records	DETROIT, MI, US 48202 (City or Town, State, Country and Zip Code)		(313)871-2000 (Area Code) (Telephone Number)			
Internet Web Site Address	THCMI.COM		(313)871-2000 (Area Code) (Telephone Number)			
Statutory Statement Contact	NICOLE ROUSH, CFO (Name)		(313)871-6402 (Area Code)(Telephone Number)(Extension)			
	NROUSH@THCMI.COM (E-Mail Address)		(313)871-4762 (Fax Number)			

OFFICERS

Name	Title
RANDY NAROWITZ	EXECUTIVE DIRECTOR
KATHLEEN THERESA KATHER	TREASURER
ROBYN JAMES ARRINGTON JR.,M.D.	MEDICAL DIRECTOR
DOUGLAS PAUL BAKER	CHAIRPERSON
RUBY OCTAVIA COLE	V-CHAIRPERSON/SECRETARY

OTHERS

DIRECTORS OR TRUSTEES

JEANETTE ABBOTT	DOUGLAS PAUL BAKER
RUBY OCTAVIA COLE	KATHLEEN THERESA KATHER
GERTRUDE HELEN MINKIEWICZ	ELIZABETH PRATCHER
LA-VENIA BROWN	

State of Michigan
County of WAYNE ss

The officers of this reporting entity, being duly sworn, each depose and say that they are the described officers of the said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

(Signature) RANDY NAROWITZ (Printed Name) 1. EXECUTIVE DIRECTOR (Title)	(Signature) KATHLEEN THERESA KATHER (Printed Name) 2. TREASURER (Title)	(Signature) DOUGLAS PAUL BAKER (Printed Name) 3. CHAIRPERSON (Title)
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Subscribed and sworn to before me this _____ day of _____, 2013	a. Is this an original filing? b. If no, 1. State the amendment number 2. Date filed 3. Number of pages attached	Yes[X] No[] _____ _____ _____
_____ (Notary Public Signature)		

ASSETS

		Current Statement Date			4
		1	2	3	
		Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	December 31 Prior Year Net Admitted Assets
1.	Bonds	1,247,836		1,247,836	1,000,076
2.	Stocks:				
2.1	Preferred stocks				
2.2	Common stocks	15,719,473		15,719,473	15,456,906
3.	Mortgage loans on real estate:				
3.1	First liens				
3.2	Other than first liens				
4.	Real estate:				
4.1	Properties occupied by the company (less \$.....0 encumbrances)				
4.2	Properties held for the production of income (less \$.....0 encumbrances)				
4.3	Properties held for sale (less \$.....0 encumbrances)				
5.	Cash (\$.....26,061,209), cash equivalents (\$.....0) and short-term investments (\$.....4,595,092)	30,656,301		30,656,301	31,365,976
6.	Contract loans (including \$.....0 premium notes)				
7.	Derivatives				
8.	Other invested assets				
9.	Receivables for securities				
10.	Securities lending reinvested collateral assets				
11.	Aggregate write-ins for invested assets				
12.	Subtotals, cash and invested assets (Lines 1 to 11)	47,623,610		47,623,610	47,822,958
13.	Title plants less \$.....0 charged off (for Title insurers only)				
14.	Investment income due and accrued	15,586		15,586	13,825
15.	Premiums and considerations:				
15.1	Uncollected premiums and agents' balances in the course of collection	1,596,519		1,596,519	1,677,639
15.2	Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$.....0 earned but unbilled premiums)				
15.3	Accrued retrospective premiums				
16.	Reinsurance:				
16.1	Amounts recoverable from reinsurers	69,929		69,929	15,285
16.2	Funds held by or deposited with reinsured companies				
16.3	Other amounts receivable under reinsurance contracts				
17.	Amounts receivable relating to uninsured plans				
18.1	Current federal and foreign income tax recoverable and interest thereon				
18.2	Net deferred tax asset				
19.	Guaranty funds receivable or on deposit				
20.	Electronic data processing equipment and software				
21.	Furniture and equipment, including health care delivery assets (\$.....0)				
22.	Net adjustments in assets and liabilities due to foreign exchange rates				
23.	Receivables from parent, subsidiaries and affiliates				
24.	Health care (\$.....1,463,431) and other amounts receivable	2,085,895	622,464	1,463,431	987,941
25.	Aggregate write-ins for other than invested assets	44,587	20,259	24,328	11,777
26.	TOTAL assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	51,436,126	642,723	50,793,403	50,529,425
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts				
28.	TOTAL (Lines 26 and 27)	51,436,126	642,723	50,793,403	50,529,425
DETAILS OF WRITE-INS					
1101.	.....			
1102.	.....			
1103.	.....			
1198.	Summary of remaining write-ins for Line 11 from overflow page				
1199.	TOTALS (Lines 1101 through 1103 plus 1198) (Line 11 above)				
2501.	Prepaid Expenses	20,259	20,259	0	
2502.	Other Receivables	24,328		24,328	11,777
2503.	.....			
2598.	Summary of remaining write-ins for Line 25 from overflow page				
2599.	TOTALS (Lines 2501 through 2503 plus 2598) (Line 25 above)	44,587	20,259	24,328	11,777

LIABILITIES, CAPITAL AND SURPLUS

		Current Period			Prior Year
		1 Covered	2 Uncovered	3 Total	4 Total
1.	Claims unpaid (less \$.....0 reinsurance ceded)	20,551,772		20,551,772	19,113,242
2.	Accrued medical incentive pool and bonus amounts	511,386		511,386	682,224
3.	Unpaid claims adjustment expenses	462,310		462,310	429,950
4.	Aggregate health policy reserves, including the liability of \$.....0 for medical loss ratio rebate per the Public Health Service Act				
5.	Aggregate life policy reserves				
6.	Property/casualty unearned premium reserve				
7.	Aggregate health claim reserves				
8.	Premiums received in advance	24,142		24,142	17,154
9.	General expenses due or accrued	462,633		462,633	458,713
10.1	Current federal and foreign income tax payable and interest thereon (including \$.....0 on realized gains (losses))				
10.2	Net deferred tax liability				
11.	Ceded reinsurance premiums payable				
12.	Amounts withheld or retained for the account of others				
13.	Remittances and items not allocated				
14.	Borrowed money (including \$.....0 current) and interest thereon \$.....0 (including \$.....0 current)				
15.	Amounts due to parent, subsidiaries and affiliates				253,558
16.	Derivatives				
17.	Payable for securities				
18.	Payable for securities lending				
19.	Funds held under reinsurance treaties with (\$.....0 authorized reinsurers, \$.....0 unauthorized reinsurers and \$.....0 certified reinsurers)				
20.	Reinsurance in unauthorized and certified (\$.....0) companies				
21.	Net adjustments in assets and liabilities due to foreign exchange rates				
22.	Liability for amounts held under uninsured plans				
23.	Aggregate write-ins for other liabilities (including \$.....0 current)				
24.	Total liabilities (Lines 1 to 23)	22,012,243		22,012,243	20,954,841
25.	Aggregate write-ins for special surplus funds	X X X	X X X		
26.	Common capital stock	X X X	X X X		
27.	Preferred capital stock	X X X	X X X		
28.	Gross paid in and contributed surplus	X X X	X X X		
29.	Surplus notes	X X X	X X X		
30.	Aggregate write-ins for other than special surplus funds	X X X	X X X		
31.	Unassigned funds (surplus)	X X X	X X X	28,781,160	29,574,584
32.	Less treasury stock, at cost:				
32.1	.....0 shares common (value included in Line 26 \$.....0)	X X X	X X X		
32.2	.....0 shares preferred (value included in Line 27 \$.....0)	X X X	X X X		
33.	Total capital and surplus (Lines 25 to 31 minus Line 32)	X X X	X X X	28,781,160	29,574,584
34.	Total Liabilities, capital and surplus (Lines 24 and 33)	X X X	X X X	50,793,403	50,529,425
DETAILS OF WRITE-INS					
2301.	.....			
2302.	.....			
2303.	.....			
2398.	Summary of remaining write-ins for Line 23 from overflow page				
2399.	TOTALS (Lines 2301 through 2303 plus 2398) (Line 23 above)				
2501.	.....	X X X	X X X		
2502.	.....	X X X	X X X		
2503.	.....	X X X	X X X		
2598.	Summary of remaining write-ins for Line 25 from overflow page	X X X	X X X		
2599.	TOTALS (Lines 2501 through 2503 plus 2598) (Line 25 above)	X X X	X X X		
3001.	.....	X X X	X X X		
3002.	.....	X X X	X X X		
3003.	.....	X X X	X X X		
3098.	Summary of remaining write-ins for Line 30 from overflow page	X X X	X X X		
3099.	TOTALS (Lines 3001 through 3003 plus 3098) (Line 30 above)	X X X	X X X		

STATEMENT OF REVENUE AND EXPENSES

		Current Year To Date		Prior Year To Date	Prior Year Ended December 31
		1 Uncovered	2 Total	3 Total	4 Total
1.	Member Months	X X X	176,467	157,829	662,602
2.	Net premium income (including \$.....0 non-health premium income)	X X X	56,069,435	47,869,588	200,316,605
3.	Change in unearned premium reserves and reserves for rate credits	X X X			
4.	Fee-for-service (net of \$.....0 medical expenses)	X X X			
5.	Risk revenue	X X X			
6.	Aggregate write-ins for other health care related revenues	X X X			
7.	Aggregate write-ins for other non-health revenues	X X X			
8.	Total revenues (Lines 2 to 7)	X X X	56,069,435	47,869,588	200,316,605
Hospital and Medical:					
9.	Hospital/medical benefits		38,141,503	29,306,481	130,699,282
10.	Other professional services		1,597,107	1,296,907	5,603,146
11.	Outside referrals				
12.	Emergency room and out-of-area		6,072,730	4,887,098	20,950,699
13.	Prescription drugs		5,130,220	4,145,229	17,298,138
14.	Aggregate write-ins for other hospital and medical		237,747	213,973	945,264
15.	Incentive pool, withhold adjustments and bonus amounts		(144,838)	214,373	266,024
16.	Subtotal (Lines 9 to 15)		51,034,469	40,064,061	175,762,553
Less:					
17.	Net reinsurance recoveries		69,929		18,937
18.	Total hospital and medical (Lines 16 minus 17)		50,964,540	40,064,061	175,743,616
19.	Non-health claims (net)				
20.	Claims adjustment expenses, including \$.....110,649 cost containment expenses		110,649	93,608	393,709
21.	General administrative expenses		5,992,831	7,523,832	24,149,470
22.	Increase in reserves for life and accident and health contracts (including \$.....0 increase in reserves for life only)				
23.	Total underwriting deductions (Lines 18 through 22)		57,068,020	47,681,501	200,286,795
24.	Net underwriting gain or (loss) (Lines 8 minus 23)	X X X	(998,585)	188,087	29,810
25.	Net investment income earned		12,160	20,038	64,579
26.	Net realized capital gains (losses) less capital gains tax of \$.....0				
27.	Net investment gains or (losses) (Lines 25 plus 26)		12,160	20,038	64,579
28.	Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$.....0) (amount charged off \$.....0)]				
29.	Aggregate write-ins for other income or expenses				
30.	Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29)	X X X	(986,425)	208,125	94,389
31.	Federal and foreign income taxes incurred	X X X			
32.	Net income (loss) (Lines 30 minus 31)	X X X	(986,425)	208,125	94,389
DETAILS OF WRITE-INS					
0601.	.....	X X X			
0602.	.....	X X X			
0603.	.....	X X X			
0698.	Summary of remaining write-ins for Line 6 from overflow page	X X X			
0699.	TOTALS (Lines 0601 through 0603 plus 0698) (Line 6 above)	X X X			
0701.	.....	X X X			
0702.	.....	X X X			
0703.	.....	X X X			
0798.	Summary of remaining write-ins for Line 7 from overflow page	X X X			
0799.	TOTALS (Lines 0701 through 0703 plus 0798) (Line 7 above)	X X X			
1401.	Other Expense				945,264
1402.	Child Adolescent Outreach		237,747	213,973	
1403.	.....			
1498.	Summary of remaining write-ins for Line 14 from overflow page				
1499.	TOTALS (Lines 1401 through 1403 plus 1498) (Line 14 above)		237,747	213,973	945,264
2901.	.....			
2902.	.....			
2903.	.....			
2998.	Summary of remaining write-ins for Line 29 from overflow page				
2999.	TOTALS (Lines 2901 through 2903 plus 2998) (Line 29 above)				

STATEMENT OF REVENUE AND EXPENSES (Continued)

		1	2	3
		Current Year To Date	Prior Year To Date	Prior Year Ended December 31
CAPITAL & SURPLUS ACCOUNT				
33.	Capital and surplus prior reporting year	29,574,584	29,181,670	29,181,670
34.	Net income or (loss) from Line 32	(986,425)	208,125	94,389
35.	Change in valuation basis of aggregate policy and claim reserves			
36.	Change in net unrealized capital gains (losses) less capital gains tax of \$.....0	262,567	212,555	167,912
37.	Change in net unrealized foreign exchange capital gain or (loss)			
38.	Change in net deferred income tax			
39.	Change in nonadmitted assets	(69,566)	(37,112)	130,613
40.	Change in unauthorized and certified reinsurance			
41.	Change in treasury stock			
42.	Change in surplus notes			
43.	Cumulative effect of changes in accounting principles			
44.	Capital Changes:			
44.1	Paid in			
44.2	Transferred from surplus (Stock Dividend)			
44.3	Transferred to surplus			
45.	Surplus adjustments:			
45.1	Paid in			
45.2	Transferred to capital (Stock Dividend)			
45.3	Transferred from capital			
46.	Dividends to stockholders			
47.	Aggregate write-ins for gains or (losses) in surplus			
48.	Net change in capital and surplus (Lines 34 to 47)	(793,424)	383,568	392,914
49.	Capital and surplus end of reporting period (Line 33 plus 48)	28,781,160	29,565,238	29,574,584
DETAILS OF WRITE-INS				
4701.	.....	.....	.....	.....
4702.	.....	.....	.....	.....
4703.	.....	.....	.....	.....
4798.	Summary of remaining write-ins for Line 47 from overflow page .....	.....	.....	.....
4799.	TOTALS (Lines 4701 through 4703 plus 4798) (Line 47 above) .....	.....	.....	.....

CASH FLOW

		1	2	3
		Current	Prior	Prior
		Year	Year	Year Ended
		To Date	To Date	December 31
Cash from Operations				
1.	Premiums collected net of reinsurance	56,158,018	48,148,090	199,604,950
2.	Net investment income	10,399	18,034	62,320
3.	Miscellaneous income	(618,860)	(143,878)	320,815
4.	TOTAL (Lines 1 to 3)	55,549,557	48,022,246	199,988,085
5.	Benefit and loss related payments	49,751,492	37,915,913	174,540,819
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts			
7.	Commissions, expenses paid and aggregate write-ins for deductions	6,071,121	7,576,172	24,511,586
8.	Dividends paid to policyholders			
9.	Federal and foreign income taxes paid (recovered) net of \$.....0 tax on capital gains (losses)			
10.	TOTAL (Lines 5 through 9)	55,822,613	45,492,085	199,052,405
11.	Net cash from operations (Line 4 minus Line 10)	(273,056)	2,530,161	935,680
Cash from Investments				
12.	Proceeds from investments sold, matured or repaid:			
12.1	Bonds			
12.2	Stocks			
12.3	Mortgage loans			
12.4	Real estate			
12.5	Other invested assets			
12.6	Net gains or (losses) on cash, cash equivalents and short-term investments	1,240		(5,525)
12.7	Miscellaneous proceeds			
12.8	TOTAL investment proceeds (Lines 12.1 to 12.7)	1,240		(5,525)
13.	Cost of investments acquired (long-term only):			
13.1	Bonds	249,000	4,395	
13.2	Stocks			
13.3	Mortgage loans			
13.4	Real estate			
13.5	Other invested assets			
13.6	Miscellaneous applications			1
13.7	TOTAL investments acquired (Lines 13.1 to 13.6)	249,000	4,395	1
14.	Net increase (or decrease) in contract loans and premium notes			
15.	Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	(247,760)	(4,395)	(5,526)
Cash from Financing and Miscellaneous Sources				
16.	Cash provided (applied):			
16.1	Surplus notes, capital notes			
16.2	Capital and paid in surplus, less treasury stock			
16.3	Borrowed funds			
16.4	Net deposits on deposit-type contracts and other insurance liabilities			
16.5	Dividends to stockholders			
16.6	Other cash provided (applied)	(188,859)	520,339	1,243,948
17.	Net cash from financing and miscellaneous sources (Lines 16.1 through 16.4 minus Line 16.5 plus Line 16.6)	(188,859)	520,339	1,243,948
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS				
18.	Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	(709,675)	3,046,105	2,174,102
19.	Cash, cash equivalents and short-term investments:			
19.1	Beginning of year	31,365,976	29,191,874	29,191,874
19.2	End of period (Line 18 plus Line 19.1)	30,656,301	32,237,979	31,365,976

Note: Supplemental Disclosures of Cash Flow Information for Non-Cash Transactions:

20.0001				
20.0002				

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other
		2 Individual	3 Group							
Total Members at end of:										
1. Prior Year	59,566	76							59,490	
2. First Quarter	58,288	84						8	58,196	
3. Second Quarter										
4. Third Quarter										
5. Current Year										
6. Current Year Member Months	176,467	242						19	176,206	
Total Member Ambulatory Encounters for Period:										
7. Physician	85,977	172							85,805	
8. Non-Physician	35,335	58							35,277	
9. Total	121,312	230							121,082	
10. Hospital Patient Days Incurred	11,242	15						1	11,226	
11. Number of Inpatient Admissions	2,638	5						1	2,632	
12. Health Premiums Written (a)	56,215,001	99,744						26,469	56,088,788	
13. Life Premiums Direct										
14. Property/Casualty Premiums Written										
15. Health Premiums Earned	56,215,001	99,744						26,469	56,088,788	
16. Property/Casualty Premiums Earned										
17. Amount Paid for Provision of Health Care Services	49,696,847	123,116						25,089	49,548,642	
18. Amount Incurred for Provision of Health Care Services	51,034,469	126,428						27,466	50,880,575	

(a) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$.....26,469.

CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims						
1 Account	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 91 - 120 days	6 Over 120 Days	7 Total
Individually Listed Claims Unpaid						
Catalyst Rx	867,596					867,596
0199999 Individually Listed Claims Unpaid	867,596					867,596
0399999 Aggregate Accounts Not Individually Listed - Covered	9,325,606					9,325,606
0499999 Subtotals	10,193,202					10,193,202
0599999 Unreported claims and other claim reserves						10,358,570
0799999 Total Claims Unpaid						20,551,772
0899999 Accrued Medical Incentive Pool And Bonus Amounts						511,386

UNDERWRITING AND INVESTMENT EXHIBIT

ANALYSIS OF CLAIMS UNPAID-PRIOR YEAR-NET OF REINSURANCE

Line of Business		Claims Paid Year to Date		Liability End of Current Quarter		5 Claims Incurred in Prior Years (Columns 1+3)	6 Estimated Claim Reserve and Claim Liability Dec 31 of Prior Year
		1	2	3	4		
		On Claims Incurred Prior to January 1 of Current Year	On Claims Incurred During the Year	On Claims Unpaid Dec 31 of Prior Year	On Claims Incurred During the Year		
1.	Comprehensive (hospital & medical)	68,713	54,565	1,451	26,733	70,164	24,894
2.	Medicare Supplement						
3.	Dental only						
4.	Vision only						
5.	Federal Employees Health Benefits Plan						
6.	Title XVIII - Medicare		24,499		2,098		
7.	Title XIX - Medicaid	18,544,838	30,978,232	1,056,924	19,464,566	19,601,762	19,088,348
8.	Other health						
9.	Health subtotal (Lines 1 to 8)	18,613,551	31,057,296	1,058,375	19,493,397	19,671,926	19,113,242
10.	Healthcare receivables (a)						
11.	Other non-health						
12.	Medical incentive pools and bonus amounts	444,891	(418,891)	179,504	331,882	624,395	682,224
13.	Totals (Lines 9 - 10 + 11 + 12)	19,058,442	30,638,405	1,237,879	19,825,279	20,296,321	19,795,466

(a) Excludes \$.00 loans or advances to providers not yet expensed.

Notes to Financial Statement

1. Nature of Business and Summary of Significant Accounting Policies

Total Health Care, Inc. (the "Company"), a not-for-profit corporation, operates as a state-licensed health maintenance organization (HMO). The Company provides medical services to persons primarily in southeastern Michigan who subscribe as recipients of federal and state health benefits or as individuals.

Total Health Care, Inc., and its wholly owned subsidiaries, Total Health Choice, Inc. and Total Health Care USA, Inc., have common officers on their respective governing boards.

a. Accounting Practices

The accompanying financial statements of Total Health Care, Inc. (the "Company" or "THC") have been prepared in conformity with statutory accounting practices prescribed or permitted by Section 1007 of the Michigan statutes of the state of Michigan for determining and reporting the financial conditions and results of operations of an insurance company for determining its solvency under Michigan Insurance law. The National Association of Insurance Commissioners ("NAIC") Accounting Practices and Procedures Manual, ("NAIC SAP") has been adopted as a component of prescribed or permitted practices by the state of Michigan.

Statutory accounting principles differ from generally accepted accounting principles (GAAP) in their definition of assets and liabilities. Specifically, certain assets (such as intangible assets and receivables greater than 90 days) are excluded from the statutory-basis balance sheet. GAAP net assets exceed statutory net assets by approximately \$642,700 and \$573,200 at March 31, 2013 and December 31, 2012, respectively. There are no significant differences between statutory accounting principles prescribed by NAIC and the State of Michigan accounting requirements that are applicable to the Company.

A reconciliation of the Company's net income and capital and surplus between NAIC SAP and practices prescribed and permitted by the state of Michigan is shown below:

	<u>2013</u>	<u>2012</u>
(1) Net Income Michigan state basis	(986,425)	94,389
(2) State Prescribed Practices (Income):	-	-
(3) State Permitted Practices (Income):	-	-
(4) Net Income, NAIC SAP	(986,425)	94,389
(5) Statutory Surplus Michigan basis	28,781,160	29,574,584
(6) State Prescribed Practices (Surplus):	-	-
(7) State Permitted Practices (Surplus):	-	-
(8) Statutory Surplus, NAIC SAP	28,781,160	29,574,584

b. Use of Estimates in the Preparation of the Financial Statements.

The preparation of financial statements in conformity with Statutory Accounting Principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities. It also requires disclosures of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the period. Actual results could differ from those estimates.

Certain significant estimates exist relating to unpaid claims. It is at least reasonably possible that these estimates will be materially revised in the near term.

c. Accounting Policy

Cash and Short-term Investments - The Company considers all highly liquid investments purchased with an original maturity of three months or less when purchased to be cash equivalents. Certificates of deposit in banks or other similar financial institutions with maturity dates of one year or less from the acquisition date are considered cash under statutory accounting principles. Short-term investments are stated at amortized cost.

Investments – The Company uses the following accounting policies:

(1) Short-term investments and long-term certificates of deposit are recorded at amortized cost, which approximates fair market value. Long-term certificates of deposit are classified as bonds on the balance sheet per statutory guidance. Investment income or loss (including realized gains and losses on

Notes to Financial Statement

investments, interest, and dividends) is included in net investment income on the statement of operations. Changes in unrealized gains and losses on investments are included as a direct adjustment to capital and surplus.

(2) Bonds not backed by other loans are stated at amortized cost using the interest method.

(3) The Company had no common stocks except items noted in (7) below.

(4) The Company had no preferred stocks.

(5) The Company had no mortgage loans.

(6) The Company had no loan-backed securities.

(7) The Company had investments in health care subsidiaries which are reported at the statutory net worth value of the subsidiary under the equity method and are reported as common stocks on the balance sheet.

(8) The Company had no joint ventures of limited partnerships.

(9) The Company had no derivatives.

(10) The Company does not utilize anticipated investment income as a factor in the premium deficiency calculation.

Unpaid Losses and Loss Adjustment Expenses – The Company includes amounts determined from claims estimates and loss reports and an amount, based on past experience, for losses incurred but not reported. Such liabilities are necessarily based on assumption and estimates and while management believes the amount is adequate, the ultimate liability may be in excess of or less than the amount provided. The methods for making such estimates and for establishing the resulting liability are continually reviewed and any adjustments are reflected in the period determined.

Capitalization - The Company's capitalization policy has not changed.

Pharmaceutical Rebate Receivables – The Company estimates pharmaceutical rebate receivables based prior period actual receipts.

Revenue Recognition and Accounts Receivable – Capitation revenue and subscriber premiums are recognized in the period that members are entitled to related health care services. A portion of the health care receivable is due from third-party payors for subscribers located within southeastern Michigan. No allowance for doubtful accounts is recorded at March 31, 2013 and December 31, 2012, respectively. Receivables greater than 90 days old are treated as non-admitted for statutory accounting purposes. Approximately \$622,000 and \$492,000 of receivables greater than 90 days old were non-admitted at March 31, 2013 and December 31, 2012, respectively.

Recognition of Medical and Hospital Expenses - Medical and hospital expenses and the related liabilities are recorded when eligible medical and hospital services are authorized or performed. Claims unpaid represent management's estimate of the ultimate cost to settle all claims incurred prior to year-end. Capitation retained for the settlement of risk-sharing is included in the accrued medical incentive pool liability at March 31, 2013 and December 31, 2012, respectively.

Physician Group Contracts - The Company contracts with physician groups for the provision of medical care and compensates the groups on a capitation basis. These contracts have a specialty claims incentive and pay-for-performance incentive. If the providers meet the incentives, they share in the savings and a payable is recorded. If the providers do not meet the incentives, they share in the excess costs and a health care receivable is recorded if deemed collectible by management. During 2013 and 2012, health care receivables and payables have been recorded from/to providers.

Hospital Group Contracts - The Company contracts with several hospitals and other groups. These contracts are paid under capitated fees or various other charge arrangements.

Malpractice Claims - The Company has a claims-made policy for malpractice insurance. The Company's policy is to accrue for estimated costs of claims and incidents during the term of the claims-made policy.

Notes to Financial Statement

Employee Staffing and Purchased Services Agreement - The Company has an employee staffing and purchased services agreement with a limited liability company, which is responsible for payment of most of the management, operational, and administrative expenses. Ultimate operational control rests with the board of directors of Total Health Care, Inc.

Income Taxes - Total Health Care, Inc. has received federal income tax exemption under Internal Revenue Code Section 501(c)(4). The Company is also exempt from state and local income taxes.

Funds Maintained Under Statutory Requirements - The Company maintains segregated funds under statutory requirements to protect members and health care providers in the event the Company is unable to meet its contractual obligations. These funds can be used only at the direction of the insurance commissioner in accordance with statutory and contractual provisions. These funds are classified according to the nature of the investment. At March 31, 2013 and December 31, 2012, \$1,005,233 and \$1,006,078, respectively were held in long-term certificates of deposit and money market funds to fulfill these requirements. Interest earned on these funds can be utilized by the Company.

2. Accounting Changes and Corrections of Errors

None

3. Business Combinations and Goodwill

a. Statutory Purchase Method- None

b. Statutory Merger - None

c. Assumption Reinsurance – None

d. Impairment Loss – None

4. Discontinued Operations

None

5. Investments

a. Mortgage Loans, including Mezzanine Real Estate Loans – None

b. Debt Restructuring – None

c. Reverse Mortgages – None

d. Loan-Backed Securities – None

e. Repurchase Agreements and/or Securities Lending Transactions – None

f. Real Estate – None

g. Low-income housing tax credits (LIHTC) – None

6. Joint Ventures, Partnerships and Limited Liability Companies

A. The Company does not have any Joint Ventures, Partnerships and Limited Liability Companies that exceed 10% of the admitted assets.

B. The Company does not have any impaired investment in Joint Ventures, Partnerships or Limited Liability Companies.

7. Investment Income

a. All investment income due and accrued with amounts that are over 90 days past due with the exception of mortgage loans in default are excluded from surplus.

b. The Company had no investment income due and accrued excluded from surplus.

Notes to Financial Statement

8. Derivative Instruments

None

9. Income Taxes

None

10. Information Concerning Parent, Subsidiaries and Affiliates

a, b, & c

The Company owns 100 percent of two subsidiaries: Total Health Care USA, Inc. and Total Health Choice, Inc., whose carrying values are equal to or exceed 10% of the total admitted assets of the company. The Company carries Total Health Care USA, Inc. and Total Health Choice, Inc. at the statutory net worth value of the subsidiary under the equity method and are reported as common stocks on the balance sheet.

Total Health Care, Inc. is the sole corporate member of Total Health Choice, Inc., a Florida not for profit corporation ("Total Health Choice"). During 2012, Total Health Choice was licensed as a health maintenance organization under the Florida Health Maintenance Organization Act. As a result of financial difficulties and its withdrawal from all markets, Total Health Choice was subject to a Consent Order that suspended its Certificate of Authority until the Florida Office of Insurance Regulation ("OIR") determined that all claim liabilities of Total Health Choice have been satisfied. In connection with the filing of its 2012 Annual Statement, Total Health Choice provided evidence to OIR that all claim liabilities have been paid and requested OIR to accept the surrender of its Certificate of Authority. On April 25, 2013, OIR issued a Consent Order accepting the relinquishment Total Health Choice's Certificate of Authority. Total Health Choice has no further obligations under this Consent Order.

Total Health Care USA, Inc. has a statutory statement value of \$15,719,473 and \$15,456,906 at March 31, 2013 and December 31, 2012, respectively. The value of investments in Total Health Care USA, Inc. has been reduced by non-admitted assets totaling \$503,302 and \$744,586 at March 31, 2013 and December 31, 2012, respectively. The value of investments in Total Health Choice, Inc. has been reduced by non-admitted assets totaling \$0 and \$0 at March 31, 2012 and December 31, 2012, respectively.

Total Health Care USA, Inc.'s (Total USA) net income was \$21,283 and \$170,069 at March 31, 2013 and December 31, 2012, respectively, and therefore the company's investment in Total USA increased by the same amount less the change in non-admitted assets of \$(241,284) in 2013 and \$2,157 in 2012.

d. Amounts Due from or (to) Related Parties – At March 31, 2013 and December 31, 2012, the Company had amounts due from (to) subsidiaries of \$0 and \$(253,558), respectively, resulting from costs paid by the Company on behalf of subsidiaries for operating expenses.

e. Guarantees – The Company has no guarantees with any companies within its holding company structure.

f. Material management contracts – The Company has an employee, office space, and equipment leasing agreement with Total Health Care USA, Inc. (USA). The agreement calls for the Company to provide personnel, office space, and supplies necessary to USA in order for USA to carry out its HMO business operations. The agreement calls for USA to pay the Company 14 percent of USA's gross revenue from the second preceding month after certain deductions. During 2013 and 2012, the proceeds from this arrangement totaled \$3,453,166 and \$12,917,041, respectively.

g. Common Control - Total Health Care, Inc., and its wholly owned subsidiaries, Total Health Choice, Inc. and Total Health Care USA, Inc., have common officers on their respective governing boards. Total Health Care, Inc., the Parent Company, is domiciled in the State of Michigan.

h. Deductions in Value - There have been no deductions in value between affiliated companies.

i. SCA that exceed 10% of Admitted Assets - None

j. Impaired SCAs - The Company did not recognize any impairment write down for its investments in Subsidiary, Controlled, or Affiliated Companies during the statement period.

k. Foreign Subsidiary - None

Notes to Financial Statement

I. Downstream Noninsurance Holding Company - None

11. Debt

None

12. Retirement Plans, Deferred Compensation, Post-Employment Benefits, Compensated Absences and other Postretirement Benefit Plans.

- a. Defined Benefit Plan – None
- b. Defined Contribution Plans – None.
- c. Multi-Employer Plan – None
- d. Consolidated/Holding Company Plans – None
- e. Post-Employment Benefits and Compensated Absences – None
- f. Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17) – None

13. Capital and Surplus, Shareholders' Dividend Restrictions and Quasi-Reorganizations

- 1) The Company has issued no capital stock.
- 2) The Company has no preferred stock outstanding.
- (3) Dividends are paid as determined by the Board of Directors with the approval of the Commissioner of the State of Michigan Office of Insurance Regulation, as long as the Company meets or exceeds minimum surplus requirements.
- (4) During 2013 the Company did not pay dividends.
- (5) Within the limitations of (3) above, there are no restrictions placed on the portion of Company profits that may be paid as ordinary dividends to stockholders.
- (6) There were no restrictions placed on the Company's surplus, including for whom the surplus is being paid.
- (7) The Company has no advances to surplus not repaid.
- (8) The Company held no stock.
- (9) There were no changes to the balances of any special surplus funds from the prior year.
- (10) The portion of unassigned funds (surplus) represented or increased (decreased) by unrealized gains (losses) is \$262,567 and \$167,912 at March 31, 2013 and December 31, 2012, respectively. The portion of unassigned funds (surplus) represented by the change in non-admitted asset value is \$(69,566) and \$130,613 at March 31, 2013 and December 31, 2012, respectively.
- (11) The Company did not issue any surplus debentures or similar obligations.
- (12) and (13) There have been no quasi-reorganizations.

14. Contingencies

Various lawsuits against the Company have arisen in the course of the Company's business. Contingent liabilities arising from litigation and other matters are not considered material in relation to the financial position of the Company. No amounts have been accrued for losses as no losses are deemed probable or estimable. Estimated losses for claims-related matters are accrued as claims unpaid.

- a. Contingent Commitments – None
- b. Assessments – None

Notes to Financial Statement

- c. Gain Contingencies – None
- d. Claims related extra contractual obligations and bad faith losses stemming from lawsuits – None
- e. All Other Contingencies – None

15. Leases

A. Lessee Operating Lease

- (1) The Company leases office space and computer software services under various non-cancelable operating lease agreements that expire through December 2016. Rent payments are the responsibility of the management company and are included in the monthly payment under the employee staffing and purchased services agreement. Rent expense for 2013 and 2012 was approximately \$220,958 and \$871,978, respectively.
- (2) The future minimum rental payments under the operating lease as of March 31, 2013 are as follows:

2013	\$ 673,343
2014	929,486
2015	844,428
2016	73,301
2017	<u>-</u>
Total	<u><u>\$ 2,520,558</u></u>

- (3) The company is not involved in any material sales – leaseback transactions.

B. Lessor Leases

None

16. Information about Financial Instruments with off-balance sheet risk and financial instruments with concentrations of credit risk.

None

17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities.

- a. Transfers of Receivables reported as Sales – None
- b. Transfer and Servicing of Financial Assets – None
- c. Wash Sales – None

18. Gain or Loss to the Reporting Entity from Uninsured A & H Plans and the Uninsured Portion of Partially Insured Plans.

- a. ASO Plans – None
- b. ASC Plans – None.
- c. Medicare or Other Similarly Structured Cost Based Reimbursement Contract - None

19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators.

None

20. Fair Value Measurements

Notes to Financial Statement

The following table presents information about the Company’s assets and liabilities measured at fair value at March 31, 2013, and the valuation techniques used by the Company to determine those fair values.

In general, fair values determined by Level 1 inputs use quoted prices in active markets for identical assets or liabilities that the Company has the ability to access.

Fair values determined by Level 2 inputs use other inputs that are observable, either directly or indirectly. These Level 2 inputs include quoted prices for similar assets and liabilities in active markets, and other inputs such as interest rates and yield curves that are observable at commonly quoted intervals.

Level 3 inputs are unobservable inputs, including inputs that are available in situations where there is little, if any, market activity for the related asset or liability.

In instances where inputs used to measure fair value fall into different levels in the above fair value hierarchy, fair value measurements in their entirety are categorized based in the lowest level input that is significant to the valuation. The Company’s assessment of the significance of particular inputs to these fair value measurements requires judgment and considers factors specific to each asset or liability.

A. (1) Fair Value Measurements at Reporting Date

	Level 1	Level 2	Level 3	Total
Assets at fair value - March 31, 2013				
Cash	\$ 17,346,771	\$ -	\$ -	\$ 17,346,771
Money Market Funds - Industrial and misc.	4,595,092	-	-	4,595,092
Bonds:				
Certificates of deposit	-	998,042	-	998,042
Corporate bonds	<u>-</u>	<u>249,794</u>	<u>-</u>	<u>249,794</u>
Total bonds	<u>-</u>	<u>1,247,836</u>	<u>-</u>	<u>1,247,836</u>
Short-term investments - Certificates of deposit	<u>-</u>	<u>8,714,438</u>	<u>-</u>	<u>8,714,438</u>
Total assets at fair value	<u>\$ 21,941,862</u>	<u>\$ 9,962,274</u>	<u>\$ -</u>	<u>\$ 31,904,136</u>
	Level 1	Level 2	Level 3	Total
Assets at fair value - December 31, 2012				
Cash	\$ 17,817,367	\$ -	\$ -	\$ 17,817,367
Money Market Funds - Industrial and misc.	3,836,439	-	-	3,836,439
Bonds:				
Certificates of deposit	-	750,120	-	750,120
Corporate bonds	<u>-</u>	<u>249,956</u>	<u>-</u>	<u>249,956</u>
Total bonds	<u>-</u>	<u>1,000,076</u>	<u>-</u>	<u>1,000,076</u>
Short-term investments - Certificates of deposit	<u>-</u>	<u>9,712,169</u>	<u>-</u>	<u>9,712,169</u>
Total assets at fair value	<u>\$ 21,653,806</u>	<u>\$ 10,712,245</u>	<u>\$ -</u>	<u>\$ 32,366,051</u>

(2) Fair Value Measurements in (Level 3) of the Fair Value - None

(3) The Company’s policy for determining when transfers between levels are recognized is determined at the end of the reporting period.

(4) The Company has not valued any securities at a Level 3.

(5) Derivative assets and liabilities- None

21. Other Items

a. Extraordinary Items – None

Notes to Financial Statement

- b. Troubled Debt Restructuring – None
- c. Other Disclosures – At March 31, 2013 and December 31, 2012, the Company had admitted assets of \$3,059,950 and \$2,665,580, respectively, in accounts receivable for amounts due from subscribers, governmental entities, and other health care providers. During 2013 and 2012, the Company routinely assessed the collectability of these receivables and directly wrote off any uncollectible receivables accordingly. Receivables not expected to be collected within 90 days were considered non-admitted.
- d. There are no balances of assets covered by SSAP No. 6, Uncollected Premium Balances, Bills Receivable for Premiums, and Amounts Due From Agents and Brokers, SSAP No. 47, Uninsured Plans, or SSAP No. 66, Retrospectively Rated Contracts.
- e. Business Interruption Insurance Recoveries - None
- f. State Transferable Tax Credits - None
- g. Subprime Related Risk Exposure – None The Companies wholly-owned subsidiaries have no activity related to subprime related risk exposure.
- h. Retained Assets - None

22. Events Subsequent

Type I. – Recognized Subsequent Events – No Change

Subsequent events have been considered through 02/20/2013 for the statutory statement issued on December 31, 2012.

None

Type II. – Non-recognized Subsequent Events – No Change

Subsequent events have been considered through 02/20/2013 for the statutory statement issued on December 31, 2012.

None.

23. Reinsurance

A. Ceded Reinsurance Report

Section 1 – General Interrogatories

(1) Are any of the reinsurers, listed in Schedule S as non-affiliated, owned in excess of 10% or controlled, either directly or indirectly, by the company or by any representative, officer, trustee, or director of the company?

Yes () No (x)

(2) Have any policies issued by the company been reinsured with a company chartered in a country other than the United States (excluding U.S. Branches of such companies) that is owned in excess of 10% or controlled directly or indirectly by an insured, a beneficiary, a creditor or an insured or any other person not primarily engaged in the insurance business?

Yes () No (x)

Section 2 – Ceded Reinsurance Report – Part A

(1) Does the company have any reinsurance agreements in effect under which the reinsurer may unilaterally cancel any reinsurance for reasons other than for nonpayment of premium or other similar credit?

Yes () No (x)

a. Not Applicable

Notes to Financial Statement

b. The Company had reinsurance recoverable receivables of \$69,929 and \$15,285 recorded at March 31, 2013 and December 31, 2012, respectively. The estimated reduction in surplus is zero.

(2) Does the reporting entity have any reinsurance agreements in effect such that the amount of losses paid or accrued through the statement date may result in a payment to the reinsurer of amounts that, in aggregate and allowing for offset of mutual credits from other reinsurance agreements with the same reinsurer, exceed the total direct premium collected under the reinsured policies?

Yes () No (x)

Section 3 – Ceded Reinsurance Report – Part B

(1) The estimated reduction in surplus is zero.

(2) The Company has renewed an agreement with Star Line Group effective November 1, 2012. The reinsurance policy provides the same coverage's on an annual per member basis after a \$220,000 (Medicaid non-CSHCS and Dual eligible) to \$300,000 (Medicaid CSHCS and Commercial Individual) deductible is reached. The maximum lifetime reinsurance indemnity payable under each agreement is \$2,000,000 per member. The reinsurance policy also provides for a supplemental corridor adjustment to reinsurance recoverable applied with the lower of: 1) 50% of reinsurance premiums paid, or 2) the amount by which reinsurance recoverable exceed 50% of the reinsurance premiums paid.

B. Uncollectible Reinsurance – None

C. Commutation of Ceded Reinsurance – None

24. Retrospectively Rated Contracts and Contracts Subject to Redetermination

A. The Company estimates accrued retrospective premium adjustments for its group health insurance business through a mathematical approach using an algorithm of the company's underwriting rules and experience rating practices.

B. The Company records accrued retrospective premium as an adjustment to earned premium.

C. The amount of net premiums written by the Company at March 31, 2013 that are subject to retrospective rating features was \$99,744 that represented less than 1% of the total net premiums written. No other net premiums written by the Company are subject to retrospective rating features.

D. At March 31, 2013, the Company had no medical loss ratio rebates required pursuant to the Public Health Service Act.

25. Change in Incurred Claims and Claims Adjustment Expenses

Reserves as of December 31, 2012 were \$20,225,416. As of March 31, 2013, \$19,058,442 has been paid for incurred claims and claims adjustment expenses attributable to insured events of prior years. Reserves remaining for prior years are now \$1,058,375 as a result of re-estimation of unpaid claims and claim adjustment expenses principally on Comprehensive Medical lines of business. Therefore, there has been a \$108,599 favorable prior-year development since December 31, 2012 to March 31, 2013. The decrease is generally the result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased, as additional information becomes known regarding individual claims.

Reserves as of December 31, 2011 were \$18,975,741. As of December 31, 2012, \$14,944,874 has been paid for incurred claims and claims adjustment expenses attributable to insured events of prior years. Reserves remaining for prior years are now \$53,548 as a result of re-estimation of unpaid claims and claim adjustment expenses principally on Comprehensive Medical lines of business. Therefore, there has been a \$3,977,319 favorable prior-year development since December 31, 2011 to December 31, 2012. The decrease is generally the result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased, as additional information becomes known regarding individual claims.

26. Intercompany Pooling Arrangements

None

27. Structured Settlements

None

Notes to Financial Statement

28. Health Care Receivables

The Company reports risk-sharing receivables and payables related to global capitation and specialty claims arrangements based upon the terms of its contracts.

No Change.

29. Participating Policies

None

30. Premium Deficiency Reserves – No Change

- | | |
|---|---|
| 1. Liability carried for premium deficiency reserves | \$0 |
| 2. Date of the most recent evaluation of this liability | 02/20/2013 |
| 3. Was anticipated investment income utilized? | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |

31. Anticipated Salvage and Subrogation

Loss reserves have not been reduced for any salvage or subrogation. During 2013 and 2012, the Company received subrogation totaling \$22,068 and \$92,469, respectively.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES
GENERAL

- 1.1 Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act?

Yes[] No[X]
- 1.2 If yes, has the report been filed with the domiciliary state?

Yes[] No[] N/A[X]
- 2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity?

Yes[] No[X]
- 2.2 If yes, date of change:
- 3.1 Have there been any substantial changes in the organizational chart since the prior quarter end?

Yes[] No[X]
- 3.2 If the response to 3.1 is yes, provide a brief description of those changes:
- 4.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?

Yes[] No[X]
- 4.2 If yes, provide the name of entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

1 Name of Entity	2 NAIC Company Code	3 State of Domicile

5. If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved? If yes, attach an explanation.

Yes[] No[] N/A[X]
- 6.1 State as of what date the latest financial examination of the reporting entity was made or is being made.

12/31/2009
- 6.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released.

12/31/2009
- 6.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).

04/25/2011
- 6.4 By what department or departments?
- 6.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments?

Yes[X] No[] N/A[]
- 6.6 Have all of the recommendations within the latest financial examination report been complied with?

Yes[X] No[] N/A[]
- 7.1 Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period?

Yes[] No[X]
- 7.2 If yes, give full information
- 8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board?

Yes[] No[X]
- 8.2 If response to 8.1 is yes, please identify the name of the bank holding company.
- 8.3 Is the company affiliated with one or more banks, thrifts or securities firms?

Yes[] No[X]
- 8.4 If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.]

1 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 FDIC	6 SEC
N/A		Yes[] No[X]	Yes[] No[X]	Yes[] No[X]	Yes[] No[X]

- 9.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?
(a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
(b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
(c) Compliance with applicable governmental laws, rules and regulations;
(d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
(e) Accountability for adherence to the code.

Yes[X] No[]
- 9.11 If the response to 9.1 is No, please explain:
- 9.2 Has the code of ethics for senior managers been amended?

Yes[] No[X]
- 9.21 If the response to 9.2 is Yes, provide information related to amendment(s).
- 9.3 Have any provisions of the code of ethics been waived for any of the specified officers?

Yes[] No[X]
- 9.31 If the response to 9.3 is Yes, provide the nature of any waiver(s).

FINANCIAL

- 10.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?

Yes[] No[X]
- 10.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount:

\$ 0

INVESTMENT

- 11.1 Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.)

Yes[] No[X]
- 11.2 If yes, give full and complete information relating thereto:
12. Amount of real estate and mortgages held in other invested assets in Schedule BA:

\$ 0
13. Amount of real estate and mortgages held in short-term investments:

\$ 0
- 14.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates?

Yes[X] No[]
- 14.2 If yes, please complete the following:

GENERAL INTERROGATORIES (Continued)

		1	2
		Prior Year-End Book/Adjusted Carrying Value	Current Quarter Book/Adjusted Carrying Value
14.21	Bonds		
14.22	Preferred Stock		
14.23	Common Stock	15,456,906	15,719,473
14.24	Short-Term Investments		
14.25	Mortgages Loans on Real Estate		
14.26	All Other		
14.27	Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)	15,456,906	15,719,473
14.28	Total Investment in Parent included in Lines 14.21 to 14.26 above		

- 15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB?

15.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state?
If no, attach a description with this statement.
16. For the reporting entity's security lending program, state the amount of the following as of the current statement date:
16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2
16.2 Total book/adjusted carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2
16.3 Total payable for securities lending reported on the liability page

\$ 0
\$ 0
\$ 0
17. Excluding items in Schedule E - Part 3 - Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook?

17.1 For all agreements that comply with the requirements of the NAIC Financial Condition Examiners Handbook, complete the following:
- Yes[] No[X]
Yes[] No[] N/A[X]

Yes[X] No[]

1	2
Name of Custodian(s)	Custodian Address
COMERICA BANK - LYNN HUTZEL-UISEL	P.O. BOX 75000, DETROIT, MI 48275-3462
.....

- 17.2 For all agreements that do not comply with the requirements of the NAIC Financial Condition Examiners Handbook, provide the name, location and a complete explanation:

1	2	3
Name(s)	Location(s)	Complete Explanation(s)
N/A

- 17.3 Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter?

17.4 If yes, give full and complete information relating thereto:
- Yes[] No[X]

1	2	3	4
Old Custodian	New Custodian	Date of Change	Reason
.....

- 17.5 Identify all investment advisors, brokers/dealers or individuals acting on behalf of broker/dealers that have access to the investment accounts, handle securities and have authority to make investments on behalf of the reporting entity:

1	2	3
Central Registration Depository	Name(s)	Address
N/A

- 18.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Securities Valuation Office been followed?

18.2 If no, list exceptions:
NOT REQUIRED BY STATE OF DOMICILE
- Yes[] No[X]

GENERAL INTERROGATORIES

PART 2 - HEALTH

1. Operating Percentages:	
1.1 A&H loss percent	90.980%
1.2 A&H cost containment percent	0.200%
1.3 A&H expense percent excluding cost containment expenses	10.660%
2.1 Do you act as a custodian for health savings accounts?	Yes[] No[X]
2.2 If yes, please provide the amount of custodial funds held as of the reporting date.	\$..... 0
2.3 Do you act as an administrator for health savings accounts?	Yes[] No[X]
2.4 If yes, please provide the balance of the funds administered as of the reporting date.	\$..... 0

SCHEDULE S - CEDED REINSURANCE
Showing All New Reinsurance Treaties - Current Year to Date

1 NAIC Company Code	2 Federal ID Number	3 Effective Date	4 Name of Reinsurer	5 Domiciliary Jurisdiction	6 Type of Reinsurance Ceded	7 Is Insurer Authorized? (Yes or No)
Accident and Health - Affiliates						
60739	74-0484030 .....	..... 11/01/2012	AMERICAN NATL INS CO	TX .....	..... SSL/L/I .....	..... Yes[X] No[]

SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS
Current Year to Date - Allocated by States and Territories

		1	Direct Business Only							
			2	3	4	5	6	7	8	9
State, Etc.		Active Status	Accident and Health Premiums	Medicare Title XVIII	Medicaid Title XIX	Federal Employees Health Benefits Program Premiums	Life and Annuity Premiums and Other Considerations	Property/ Casualty Premiums	Total Columns 2 Through 7	Deposit-Type Contracts
1.	Alabama (AL)	N								
2.	Alaska (AK)	N								
3.	Arizona (AZ)	N								
4.	Arkansas (AR)	N								
5.	California (CA)	N								
6.	Colorado (CO)	N								
7.	Connecticut (CT)	N								
8.	Delaware (DE)	N								
9.	District of Columbia (DC)	N								
10.	Florida (FL)	N								
11.	Georgia (GA)	N								
12.	Hawaii (HI)	N								
13.	Idaho (ID)	N								
14.	Illinois (IL)	N								
15.	Indiana (IN)	N								
16.	Iowa (IA)	N								
17.	Kansas (KS)	N								
18.	Kentucky (KY)	N								
19.	Louisiana (LA)	N								
20.	Maine (ME)	N								
21.	Maryland (MD)	N								
22.	Massachusetts (MA)	N								
23.	Michigan (MI)	L	99,194	26,469	55,943,773				56,069,436	
24.	Minnesota (MN)	N								
25.	Mississippi (MS)	N								
26.	Missouri (MO)	N								
27.	Montana (MT)	N								
28.	Nebraska (NE)	N								
29.	Nevada (NV)	N								
30.	New Hampshire (NH)	N								
31.	New Jersey (NJ)	N								
32.	New Mexico (NM)	N								
33.	New York (NY)	N								
34.	North Carolina (NC)	N								
35.	North Dakota (ND)	N								
36.	Ohio (OH)	N								
37.	Oklahoma (OK)	N								
38.	Oregon (OR)	N								
39.	Pennsylvania (PA)	N								
40.	Rhode Island (RI)	N								
41.	South Carolina (SC)	N								
42.	South Dakota (SD)	N								
43.	Tennessee (TN)	N								
44.	Texas (TX)	N								
45.	Utah (UT)	N								
46.	Vermont (VT)	N								
47.	Virginia (VA)	N								
48.	Washington (WA)	N								
49.	West Virginia (WV)	N								
50.	Wisconsin (WI)	N								
51.	Wyoming (WY)	N								
52.	American Samoa (AS)	N								
53.	Guam (GU)	N								
54.	Puerto Rico (PR)	N								
55.	U.S. Virgin Islands (VI)	N								
56.	Northern Mariana Islands (MP)	N								
57.	Canada (CAN)	N								
58.	Aggregate other alien (OT)	X X X								
59.	Subtotal	X X X	99,194	26,469	55,943,773				56,069,436	
60.	Reporting entity contributions for Employee Benefit Plans	X X X								
61.	Total (Direct Business)	(a)..... 1	99,194	26,469	55,943,773				56,069,436	
DETAILS OF WRITE-INS										
5801.	.....	X X X								
5802.	.....	X X X								
5803.	.....	X X X								
5898.	Summary of remaining write-ins for Line 58 from overflow page	X X X								
5899.	TOTALS (Lines 5801 through 5803 plus 5898) (Line 58 above)	X X X								

(L) Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) Registered - Non-domiciled RRGs; (Q) Qualified - Qualified or Accredited Reinsurer; (E) Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state; (N) None of the above - Not allowed to write business in the state.

(a) Insert the number of L responses except for Canada and Other Alien.

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER
MEMBERS OF A HOLDING COMPANY GROUP
PART 1 - ORGANIZATIONAL CHART

TOTAL HEALTH CARE, INC. – PARENT
38-2018957, NAIC #95644, STATE OF MICHIGAN

TOTAL HEALTH CARE USA, INC. – WHOLLY OWNED SUBSIDIARY OF TOTAL HEALTH CARE, INC.
383240485, NAIC #12326, STATE OF MICHIGAN

TOTAL HEALTH CHOICE, INC. – WHOLLY OWNED SUBSIDIARY OF TOTAL HEALTH CARE, INC.
33-0603319, NAIC #95134, STATE OF FLORIDA

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Comp- any Code	Federal ID Number	FEDERAL RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domic- iliary Loca- tion	Rela- tion- ship to Report- ing Entity	Directly Controlled by (Name of Entity / Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies) / Person(s)	*
1238 ..	TOTAL HEALTH GROUP	95644	38-2018957 ..	.....	.....	.....	TOTAL HEALTH CARE INC	.. MI ..	.....	.....	.....	.....	.....	.....
1238 ..	TOTAL HEALTH GROUP	95134	33-0603319 ..	.....	.....	.....	TOTAL HEALTH CHOICE INC .....	.. FL ..	... DS ..	TOTAL HEALTH CARE INC ...	Ownership .....	..... 100.0	TOTAL HEALTH CARE INC	.....
1238 ..	TOTAL HEALTH GROUP	12326	38-3240485 ..	.....	.....	.....	TOTAL HEALTH CARE USA INC .....	.. MI ..	... DS ..	TOTAL HEALTH CARE INC ...	Ownership .....	..... 100.0	TOTAL HEALTH CARE INC	.....

Asterisk	Explanation
0000001	.....

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

1. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?

RESPONSE
No

Explanations:

Bar Codes:

Medicare Part D Coverage Supplement



STATEMENT OF REVENUE AND EXPENSES

	Current Year To Date		Prior Year To Date	Prior Year Ended December 31
	1	2	3	4
	Uncovered	Total	Total	Total
0604.	X X X .....	.....	.....	.....
0697. Summary of remaining write-ins for Line 6 (Lines 0604 through 0696)	X X X .....	.....	.....	.....

STATEMENT OF REVENUE AND EXPENSES (Continued)

	1	2	3
	Current Year To Date	Prior Year To Date	Prior Year Ended December 31
4704.
4797. Summary of remaining write-ins for Line 47 (Lines 4704 through 4796)

STATEMENT AS OF **March 31, 2013** OF THE **TOTAL HEALTH CARE, INC.**

SCHEDULE A - VERIFICATION

Real Estate		
	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year		
2. Cost of acquired		
2.1 Actual cost at time of acquisition		
2.2 Additional investment made after acquisition		
3. Current year change in encumbrances		
4. Total gain (loss) on disposals		
5. Deduct amounts received on disposals		
6. Total foreign exchange change in book/adjusted carrying value		
7. Deduct current year's other than temporary impairment recognized		
8. Deduct current year's depreciation		
9. Book/adjusted carrying value at the end of current period (Lines 1 + 2 + 3 + 4 - 5 + 6 - 7 - 8)		
10. Deduct total nonadmitted amounts		
11. Statement value at end of current period (Line 9 minus Line 10)		

SCHEDULE B - VERIFICATION

Mortgage Loans

	1	2
	Year To Date	Prior Year Ended December 31
1. Book value/recorded investment excluding accrued interest, December 31 of prior year		
2. Cost of acquired:		
2.1 Actual cost at time of acquisition		
2.2 Additional investment made after acquisition		
3. Capitalized deferred interest and other		
4. Accrual of discount		
5. Unrealized valuation increase (decrease)		
6. Total gain (loss) on disposals		
7. Deduct amounts received on disposals		
8. Deduct amortization of premium and mortgage interest points		
9. Total foreign exchange change in book value/recorded investment		
10. Deduct current year's other than temporary impairment recognized		
11. Book value/recorded investment excluding accrued interest at end of current period (Lines 1 + 2 + 3 + 4 + 5 + 6 - 7 - 8 + 9 - 10)		
12. Total valuation allowance		
13. Subtotal (Line 11 plus Line 12)		
14. Deduct total nonadmitted amounts		
15. Statement value at end of current period (Line 13 minus Line 14)		

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year		
2. Cost of acquired:		
2.1 Actual cost at time of acquisition		
2.2 Additional investment made after acquisition		
3. Capitalized deferred interest and other		
4. Accrual of discount		
5. Unrealized valuation increase (decrease)		
6. Total gain (loss) on disposals		
7. Deduct amounts received on disposals		
8. Deduct amortization of premium and depreciation		
9. Total foreign exchange change in book/adjusted carrying value		
10. Deduct current year's other than temporary impairment recognized		
11. Book/adjusted carrying value at end of current period (Lines 1 + 2 + 3 + 4 + 5 + 6 - 7 - 8 + 9 - 10)		
12. Deduct total nonadmitted amounts		
13. Statement value at end of current period (Line 11 minus Line 12)		

SCHEDULE D - VERIFICATION

Bonds and Stocks

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year	16,456,982	16,283,544
2. Cost of bonds and stocks acquired	249,000	
3. Accrual of discount		
4. Unrealized valuation increase (decrease)	261,327	173,438
5. Total gain (loss) on disposals		
6. Deduct consideration for bonds and stocks disposed of		
7. Deduct amortization of premium		
8. Total foreign exchange change in book/adjusted carrying value		
9. Deduct current year's other than temporary impairment recognized		
10. Book/adjusted carrying value at end of current period (Lines 1 + 2 + 3 + 4 + 5 - 6 - 7 + 8 - 9)	16,967,309	16,456,982
11. Deduct total nonadmitted amounts		
12. Statement value at end of current period (Line 10 minus Line 11)	16,967,309	16,456,982

SCHEDULE D - PART 1B
Showing the Acquisitions, Dispositions and Non-Trading Activity
During the Current Quarter for all Bonds and Preferred Stock by Rating Class

	1	2	3	4	5	6	7	8
	Book/Adjusted Carrying Value Beginning of Current Quarter	Acquisitions During Current Quarter	Dispositions During Current Quarter	Non-Trading Activity During Current Quarter	Book/Adjusted Carrying Value End of First Quarter	Book/Adjusted Carrying Value End of Second Quarter	Book/Adjusted Carrying Value End of Third Quarter	Book/Adjusted Carrying Value December 31 Prior Year
BONDS								
1. Class 1 (a)	4,836,516	2,807,654	1,800,002	(1,240)	5,842,928			4,836,516
2. Class 2 (a)								
3. Class 3 (a)								
4. Class 4 (a)								
5. Class 5 (a)								
6. Class 6 (a)								
7. Total Bonds	4,836,516	2,807,654	1,800,002	(1,240)	5,842,928			4,836,516
PREFERRED STOCK								
8. Class 1								
9. Class 2								
10. Class 3								
11. Class 4								
12. Class 5								
13. Class 6								
14. Total Preferred Stock								
15. Total Bonds & Preferred Stock	4,836,516	2,807,654	1,800,002	(1,240)	5,842,928			4,836,516

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of non-rated short-term and cash equivalent bonds by NAIC designation: NAIC 1 \$.....0; NAIC 2 \$.....0; NAIC 3 \$.....0; NAIC 4 \$.....0; NAIC 5 \$.....0; NAIC 6 \$.....0

SCHEDULE DA - PART 1

Short - Term Investments

	1 Book/Adjusted Carrying Value	2 Par Value	3 Actual Cost	4 Interest Collected Year To Date	5 Paid for Accrued Interest Year To Date
9199999. Totals	4,595,092	X X X	4,595,092	1,128	

SCHEDULE DA - Verification

Short-Term Investments

		1 Year To Date	2 Prior Year Ended December 31
1.	Book/adjusted carrying value, December 31 of prior year	3,836,440	5,732,581
2.	Cost of short-term investments acquired	2,558,654	8,081,895
3.	Accrual of discount		
4.	Unrealized valuation increase (decrease)		
5.	Total gain (loss) on disposals		
6.	Deduct consideration received on disposals	1,800,002	9,978,036
7.	Deduct amortization of premium		
8.	Total foreign exchange change in book/adjusted carrying value		
9.	Deduct current year's other than temporary impairment recognized		
10.	Book/adjusted carrying value at end of current period (Lines 1 + 2 + 3 + 4 + 5 - 6 - 7 + 8 - 9)	4,595,092	3,836,440
11.	Deduct total nonadmitted amounts		
12.	Statement value at end of current period (Line 10 minus Line 11)	4,595,092	3,836,440

SI04 Schedule DB - Part A Verification NONE

SI04 Schedule DB - Part B Verification NONE

SI05 Schedule DB Part C Section 1 NONE

SI06 Schedule DB Part C Section 2 NONE

SI07 Schedule DB - Verification NONE

SI08 Schedule E - Verification (Cash Equivalents) NONE

E01 Schedule A Part 2 NONE

E01 Schedule A Part 3 NONE

E02 Schedule B Part 2 NONE

E02 Schedule B Part 3 NONE

E03 Schedule BA Part 2 NONE

E03 Schedule BA Part 3 NONE

SCHEDULE D - PART 3

Show All Long-Term Bonds and Stock Acquired During the Current Quarter

1	2	3	4	5	6	7	8	9	10
CUSIP Identification	Description	Foreign	Date Acquired	Name of Vendor	Number of Shares of Stock	Actual Cost	Par Value	Paid for Accrued Interest and Dividends	NAIC Designation or Market Indicator (a)
Bonds - Industrial and Miscellaneous (Unaffiliated)									
72663QYD5	PLAINS CAPITAL BK LUBBOCK TX .30% .....	.....	..... 02/14/2013	COMERICA BANK .....	..... X X X .....	..... 249,000 .....	..... 249,000 .....	.....	1FE
3899999 Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated) .....					..... X X X .....	..... 249,000 .....	..... 249,000 .....	.....	..... X X X
8399997 Subtotal - Bonds - Part 3 .....					..... X X X .....	..... 249,000 .....	..... 249,000 .....	.....	..... X X X
8399999 Subtotal - Bonds .....					..... X X X .....	..... 249,000 .....	..... 249,000 .....	.....	..... X X X
9899999 Subtotal - Preferred and Common Stocks .....					..... X X X .....	.....	..... X X X .....	.....	..... X X X
9999999 Total - Bonds, Preferred and Common Stocks .....					..... X X X .....	..... 249,000 .....	..... X X X .....	.....	..... X X X

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues0.

E05 Schedule D Part 4 NONE

E06 Schedule DB Part A Section 1 NONE

E07 Schedule DB Part B Section 1 NONE

E08 Schedule DB Part D Section 1 NONE

E09 Schedule DB Part D Section 2 - Collateral Pledged By Reporting Entity NONE

E09 Schedule DB Part D Section 2 - Collateral Pledged To Reporting Entity NONE

E10 Schedule DL - Part 1 - Securities Lending Collateral Assets NONE

E11 Schedule DL - Part 2 - Securities Lending Collateral Assets NONE

SCHEDULE E - PART 1 - CASH

Month End Depository Balances									
1		2	3	4	5	Book Balance at End of Each Month During Current Quarter			9
Depository		Code	Rate of Interest	Amount of Interest Received During Current Quarter	Amount of Interest Accrued at Current Statement Date	6	7	8	*
						First Month	Second Month	Third Month	
open depositories									
Comerica Bank	COMERICA, DETROIT, MI		0.090	1,776	487	18,192,794	18,259,208	17,346,771	X X X
Apple BK for SavingsNY .30%	COMERICA, DETROIT, MI	09/26/2012	0.300	996					X X X
Banco Bilbao Vizcaya .50%	COMERICA, DETROIT, MI	05/30/2012	0.500	184		53,000			X X X
Bank Hapoalim B M NY BRH .50%	COMERICA, DETROIT, MI	11/09/2012	0.500	873		250,000			X X X
Bank India New York NY .50%	COMERICA, DETROIT, MI	09/12/2012	0.500	875		250,000			X X X
Bank Madison GA .25%	COMERICA, DETROIT, MI	11/20/2012	0.250	627		249,998			X X X
Bank of Baroda New York .45%	COMERICA, DETROIT, MI	07/20/2012	0.450	170		250,000			X X X
Bank of China NY NY.20%	COMERICA, DETROIT, MI	02/20/2013	0.200	627		249,998			X X X
Bank of China NY NY.35%	COMERICA, DETROIT, MI	02/09/2012	0.350	499		249,998			X X X
BBCN BK Los Angeles CA .30%	COMERICA, DETROIT, MI	11/06/2012	0.300	370		248,970	248,990		X X X
Beal Bank of Nevada Las Vega .35%	COMERICA, DETROIT, MI	02/08/2012	0.350	607		249,035	249,015		X X X
Beal Bank of Plano, Texas .35%	COMERICA, DETROIT, MI	02/08/2012	0.350	370		248,965	248,985		X X X
Beal BK Las Vegas Nev .20%	COMERICA, DETROIT, MI	02/13/2013	0.200		585	248,920	248,950	248,978	X X X
Beal BK Las Vegas Nev .35%	COMERICA, DETROIT, MI	07/16/2012	0.350		470	195,978	195,986	195,994	X X X
Cedar Rapids Bk&TR Iowa .25%	COMERICA, DETROIT, MI	07/23/2012	0.250		698	249,022	249,037	249,025	X X X
Citizens St BK Okemah Okla .35%	COMERICA, DETROIT, MI	07/30/2012	0.350		698	248,945	248,965	248,985	X X X
Discover Bank Greenwood DEL .25%	COMERICA, DETROIT, MI	02/08/2012	0.250		357	249,000	249,000	249,000	X X X
Everbank Jacksonville F S B .50%	COMERICA, DETROIT, MI	09/21/2012	0.500	307	109	249,010	249,057	249,040	X X X
F&M BK Clarksville Tenn .30%	COMERICA, DETROIT, MI	08/17/2012	0.300		1,044	249,077	249,057	249,040	X X X
First Niagara Bk Natl Assn Buffa .30%	COMERICA, DETROIT, MI	09/24/2012	0.300		339	248,861	248,895	248,925	X X X
First Premier Bk Sioux Falls S D .30%	COMERICA, DETROIT, MI	09/20/2012	0.300		379	248,885	248,920	248,940	X X X
FirstBank P R Santurce .30%	COMERICA, DETROIT, MI	02/08/2013	0.300		783	249,012	249,035	249,035	X X X
FirstBank P R Santurce .40%	COMERICA, DETROIT, MI	02/08/2013	0.400	153	15	248,778	248,843	248,885	X X X
Flushing Svgs BK N Y .40%	COMERICA, DETROIT, MI	07/30/2012	0.400	153	10	248,973	249,002	249,015	X X X
Franklin Sec Bk Plains PA .30%	COMERICA, DETROIT, MI	09/24/2012	0.300	246	46	248,945	248,980	249,000	X X X
GE Cap Retail Bk Utah Instl Ctf .30%	COMERICA, DETROIT, MI	09/21/2012	0.300	215	10	249,002	249,030	249,040	X X X
Goldman Sachs Bk USA NY .35%	COMERICA, DETROIT, MI	09/12/2012	0.350	153	7	248,761	248,831	248,878	X X X
Hancock Bk Gulfport MS .40%	COMERICA, DETROIT, MI	11/02/2012	0.400	184	35	248,803	248,851	248,898	X X X
Hardin Cnty Bk Savannah Tenn .25%	COMERICA, DETROIT, MI	07/26/2012	0.250		465	248,803	248,846	248,895	X X X
Iberiabank Lafayette LA .30%	COMERICA, DETROIT, MI	09/28/2012	0.300	246	4	248,788	248,818	248,876	X X X
IroquoisFed Svgs & Ln Assn Wats .25%	COMERICA, DETROIT, MI	07/30/2012	0.250		291	248,858	248,878	248,925	X X X
Marlin Business Bk Salt Lake .25%	COMERICA, DETROIT, MI	04/23/2012	0.250		686	249,062	249,062	249,070	X X X
Medallion Bk Salt Lake City .30%	COMERICA, DETROIT, MI	11/09/2012	0.300		480	248,841	248,868	248,905	X X X
Merrick Bk Corp South Jordan.35%	COMERICA, DETROIT, MI	11/15/2012	0.350		395	249,057	249,067	249,065	X X X
Mizrahi Tefahot Bk Ltd Los Angel .20%	COMERICA, DETROIT, MI	02/19/2013	0.200		383	248,973	249,000	249,000	X X X
Mizuho Corporate BK USA Instl .30%	COMERICA, DETROIT, MI	04/25/2012	0.300		379	248,940	248,970	248,975	X X X
NewRep Svg BK Roanoke Rapids N .30%	COMERICA, DETROIT, MI	08/30/2012	0.300	184	2	248,636	248,721	248,781	X X X
PeoplesBk Biloxi Miss .30%	COMERICA, DETROIT, MI	08/15/2012	0.300		488	248,985	249,035	249,062	X X X
Plainscapital Bk Lubbock TX .25%	COMERICA, DETROIT, MI	09/11/2012	0.250		293	248,612	248,696	248,763	X X X
PrivateBank & TC Chicago Il .30%	COMERICA, DETROIT, MI	04/25/2012	0.300	215	41	248,684	248,766	248,826	X X X
Safra National Bk .25%	COMERICA, DETROIT, MI	02/08/2012	0.250	153	20	248,472	248,577	248,661	X X X
Safra National Bk New York NY .30%	COMERICA, DETROIT, MI	02/14/2013	0.300		135		248,417	248,539	X X X
Sovereign Bank .40%	COMERICA, DETROIT, MI	01/25/2012	0.400		146		248,502	248,619	X X X
Standard Bk & TR Co Hickory Hill .20%	COMERICA, DETROIT, MI	02/09/2012	0.200		55		249,323	249,443	X X X
State Bk India New York N Y .50%	COMERICA, DETROIT, MI	05/30/2012	0.500		14		52,864	52,889	X X X
Synovus BK Columbus GA .35%	COMERICA, DETROIT, MI	01/30/2013	0.350	58	49	248,395	249,380	249,503	X X X
US Ameri Bank Laro FLA .30%	COMERICA, DETROIT, MI	01/25/2013	0.300		56	248,298	249,353	249,468	X X X
Wex Bk Midvale Utah .35%	COMERICA, DETROIT, MI	11/21/2012	0.350		95		249,378	249,495	X X X
Deposits in .....0									
depositories that do not exceed the allowable limit in any one depository (see Instructions) - open depositories									X X X
Totals - Open Depositories									X X X

SCHEDULE E - PART 1 - CASH

Month End Depository Balances										
1			2	3	4	5	Book Balance at End of Each Month During Current Quarter			9
							6	7	8	
Depository			Code	Rate of Interest	Amount of Interest Received During Current Quarter	Amount of Interest Accrued at Current Statement Date	First Month	Second Month	Third Month	*
0199998 Deposits in .....0 depositories that do not exceed the allowable limit in any one depository (see Instructions) - open depositories			X X X	... X X X ..						X X X
0199999 Totals - Open Depositories			X X X	... X X X ..	... 10,241	..... 10,549	... 28,154,134	... 27,719,158	... 26,061,209	X X X
suspended depositories										
Deposits in .....0 depositories that do not exceed the allowable limit in any one depository (see Instructions) - suspended depositories										
Totals - Suspended Depositories										
0299998 Deposits in .....0 depositories that do not exceed the allowable limit in any one depository (see Instructions) - suspended depositories			X X X	... X X X ..						X X X
0299999 Totals - Suspended Depositories			X X X	... X X X ..						X X X
0399999 Total Cash On Deposit			X X X	... X X X ..	... 10,241	..... 10,549	... 28,154,134	... 27,719,158	... 26,061,209	X X X
0499999 Cash in Company's Office			X X X	... X X X ..	X X X	X X X				X X X
0599999 Total Cash			X X X	... X X X ..	... 10,241	..... 10,549	... 28,154,134	... 27,719,158	... 26,061,209	X X X

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

1	2	3	4	5	6	7	8
Description	Code	Date Acquired	Rate of Interest	Maturity Date	Book/Adjusted Carrying Value	Amount of Interest Due & Accrued	Amount Received During Year
<div>NONE</div>							
8699999 Total - Cash Equivalents

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